

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET

SERIAL NO. 09/433,418

FILING DATE

APPLICANT(S)

5-21-84

CLAIMS APPLIED	AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT	
	IND	DEP	IND	DEP
1	/			
2	/			
3	/			
4	/			
5	/			
6	/			
7	/			
8	/			
9	/			
10	/			
11	/			
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44				
45				
46				
47				
48				
49				
50				
TOTAL IND.	2			
TOTAL DEP.	15			
TOTAL CLAIMS	17			

CLAIMS

	IND	DEP	IND	DEP	IND	DEP
51						
52						
53						
54						
55						
56						
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TOTAL IND.						
TOTAL DEP.						
TOTAL CLAIMS						